**Tennessee Department of Human Services**

**INSTRUCTIONS FOR USE OF FORM HS-3463,**

**SSBG Contract Budget Revision**

1. **Purpose of the form**

to make adjustments to approved contracting agency budgets

1. **When it is used**

Each time money needs to be moved between line items in agency budgets

1. **Who completes the form**

Fiscal staff from contracting agencies

1. **An explanation of what goes into any field that is not *clearly* self-explanatory or any additional information needed to process this form (e.g. routing, processing etc.)**

N/A

1. **Who needs the original and where should it be filed**

SSBG Program Coordinator or Director receives the form and files it in the SSBG Shared Drive

1. **Who needs a copy and where should it be filed**

N/A

1. **Length of time the form must be maintained after the service is rendered/case closed**

Pending